

STATE OF INDIANA ) IN THE HAMILTON SUPERIOR COURT NO. 4  
 ) SS:  
COUNTY OF HAMILTON ) CAUSE NO. 29D04-\_\_\_\_\_-SC-\_\_\_\_\_

\_\_\_\_\_,  
Plaintiff(s),  
vs.

\_\_\_\_\_,  
Defendant,

\_\_\_\_\_  
Garnishee Defendant (Employer).

Defendant=s SSN: \_\_\_\_\_,  
(must submit this form on green paper)

**NOTICE:** Indiana Code ' 34-25-3-3 provides that the Garnishee Defendant (Employer) is accountable for monies in his hands and/or payable to Defendant from the date of the service of these interrogatories.

**INTERROGATORIES PROPOUNDED TO GARNISHEE DEFENDANT (EMPLOYER)**

Plaintiff submits the following interrogatories to the Garnishee Defendant (**all questions must be answered**):

1. Is Defendant in your employ? G Yes G No
2. If Defendant is no longer in your employ, do you retain any monies payable to him? G Yes G No  
If yes, how much? \$\_\_\_\_\_.
3. If the Defendant is no longer employed by you, what is the name and address of Defendant=s current employer?  
\_\_\_\_\_.
4. What is Defendant=s residence address? \_\_\_\_\_.
5. What is Defendant=s Social Security number? \_\_\_\_\_ Date of Birth? \_\_\_\_\_.
6. If defendant is on an hourly pay rate, what is that rate? \_\_\_\_\_.
7. What is Defendant=s pay period? (Weekly/bi-weekly/monthly) \_\_\_\_\_.
8. If Defendant is on a salary, what is the **gross** salary? \_\_\_\_\_.
9. State the amount of any other wages, salary, commissions, rebates, profits, or income the defendant draws for receives from you other than those above. \$\_\_\_\_\_.
10. Are there, at present, any garnishments or wage attachments on Defendant=s earnings? G Yes G No  
If yes, list the case numbers: \_\_\_\_\_.

I swear or affirm, under the penalty of perjury, that the foregoing representations are true.

Date signed:\_\_\_\_\_

\_\_\_\_\_  
Signature

Please return to:  
**Hamilton County Clerk**  
**One Hamilton County Square, Suite 292**  
**Noblesville, IN 46060**

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Position with Garnishee Defendant (Employer)